| Fill in this information to identify your case: | | |
|---|-------------------------------|-------------------------------------|
| United States Bankruptcy Court for the: | | |
| DISTRICT OF OREGON | _ | |
| Case number (if known) | Chapter you are filing under: | |
| | ■ Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | ☐ Chapter 13 | Check if this an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | rt 1: | Identify Yourself | | |
|----|--------------------|---|--|---|
| | | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | You | r full name | | |
| | Writ | e the name that is on | Marisol | |
| | pictu | r government-issued ure identification (for mple, your driver's | First name | First name |
| | licer | nse or passport). | Middle name | Middle name |
| | Brin | g your picture | Pizano | |
| | mee | itification to your eting with the trustee. | Last name and Suffix (Sr., Jr., II, III) | Last name and Suffix (Sr., Jr., II, III) |
| | | | | |
| 2. | | other names you have d in the last 8 years | | |
| | | ude your married or den names. | | |
| 3. | you nun Indi | y the last 4 digits of r Social Security nber or federal vidual Taxpayer ntification number | xxx-xx-6540 | |

| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
|----|--|---|--|
| 4. | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names | ■ I have not used any business name or EINs. Business name(s) EINs | ☐ I have not used any business name or EINs. Business name(s) EINs |
| 5. | Where you live | 2312 NW McGarey Dr. | If Debtor 2 lives at a different address: |
| | | McMinnville, OR 97128 Number, Street, City, State & ZIP Code | Number, Street, City, State & ZIP Code |
| | | Yamhill County | County |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
| | | PO Box 667 Cornelius, OR 97113 | |
| | | Number, P.O. Box, Street, City, State & ZIP Code | Number, P.O. Box, Street, City, State & ZIP Code |
| 6. | Why you are choosing this district to file for | Check one: | Check one: |
| | bankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. |
| | | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) |
| | | | |

| | otor 1 Marisol Pizano | | | | Case number (if known) | |
|-----|---|--------------------------|---|--|---|----------|
| | | | | | | |
| Par | t 2: Tell the Court About | ∕our Bankru _l | ptcy Case | | | |
| 7. | The chapter of the Bankruptcy Code you are choosing to file under | | | ion of each, see <i>Notice Required by</i> p of page 1 and check the appropria | v 11 U.S.C. § 342(b) for Individuals Filing for Bankrup tte box. | otcy |
| | choosing to file under | ■ Chapter | 7 | | | |
| | | ☐ Chapter | 11 | | | |
| | | ☐ Chapter | 12 | | | |
| | | ☐ Chapter | 13 | | | |
| 8. | How you will pay the fee | about order. | how you may pay. | Typically, if you are paying the fee y | ck with the clerk's office in your local court for more courself, you may pay with cash, cashier's check, or nalf, your attorney may pay with a credit card or chec | money |
| | | | | | ion, sign and attach the Application for Individuals to | Pay |
| | | | • | ents (Official Form 103A). | on only if you are filing for Chapter 7. By law, a judge | may |
| | | but is applie | not required to, waives to your family size | ve your fee, and may do so only if ye and you are unable to pay the fee | our income is less than 150% of the official poverty I in installments). If you choose this option, you must ticial Form 103B) and file it with your petition. | ine that |
| 9. | Have you filed for | ■ No. | | | | |
| | bankruptcy within the last 8 years? | ☐ Yes. | | | | |
| | last o years: | | District | When | Case number | |
| | | | District | When | | |
| | | | District | When | Case number Case number | |
| | | · | | wileff | Case Hullibel | |
| 10. | Are any bankruptcy cases pending or being | ■ No | | | | |
| | filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | ☐ Yes. | | | | |
| | | Ι | Debtor | | Relationship to you | |
| | | [| District | When | Case number, if known | |
| | | [| Debtor | | Relationship to you | |
| | | [| District | When | Case number, if known | |
| 11. | Do you rent your | ■ No. | Go to line 12. | | | |
| | residence? | ☐ Yes. | Has your landlord o | obtained an eviction judgment again | st you? | |
| | | 55. | □ No. Go to lii | | | |
| | | | ☐ Yes. Fill out | t Initial Statement About an Eviction | Judgment Against You (Form 101A) and file it as pa | art of |

| Deb | otor 1 Marisol Pizano | | | | Case number (if known) |
|--|---|---|--|-------------------------------------|---|
| | | | | | |
| Don | 1 2 Domant About Amy Du | | V 0 | aa a Cala Duamia | 4 |
| Par | Report About Any Bu | Isinesses | You Own | as a Sole Proprie | tor |
| 12. Are you a sole proprie of any full- or part-time business? | | ■ No. | Go to | Part 4. | |
| | | ☐ Yes. | Name | and location of bus | siness |
| | A sole proprietorship is a | | | | |
| | business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. | | Name | of business, if any | |
| | If you have more than one sole proprietorship, use a separate sheet and attach | | Numb | er, Street, City, Sta | te & ZIP Code |
| | it to this petition. | | Checi | k the appropriate bo | ox to describe your business: |
| | · | | | | ness (as defined in 11 U.S.C. § 101(27A)) |
| | | | | Single Asset Real | Estate (as defined in 11 U.S.C. § 101(51B)) |
| | | | | Stockbroker (as d | lefined in 11 U.S.C. § 101(53A)) |
| | | | | Commodity Broke | er (as defined in 11 U.S.C. § 101(6)) |
| | | | | None of the above | e |
| Chapter 11 of the deadlines. If you indicate | | dicate that you are ow statement, and f | court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of federal income tax return or if any of these documents do not exist, follow the procedure | | |
| | For a definition of <i>small</i> business debtor, see 11 U.S.C. § 101(51D). | ■ No. | I am r | ot filing under Char | oter 11. |
| | | □ No. | I am f Code. | • | 11, but I am NOT a small business debtor according to the definition in the Bankruptcy |
| | | ☐ Yes. | I am f | ling under Chapter | 11 and I am a small business debtor according to the definition in the Bankruptcy Code. |
| | | | | | |
| | • | | Hazardo | us Property or An | y Property That Needs Immediate Attention |
| 14. | Do you own or have any property that poses or is | No. | | | |
| | alleged to pose a threat of imminent and identifiable hazard to | ☐ Yes. | What is | the hazard? | |
| | public health or safety? Or do you own any property that needs immediate attention? | | | iate attention is why is it needed? | |
| | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? | | Where is | the property? | |
| | | | | | Number, Street, City, State & Zip Code |
| | | | | | |
| | | | | | |
| | | | | | |

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of: |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

| Deb | otor 1 Marisol Pizano | | | Case num | nber (if known) |
|-----|---|---------------------|---|--|---|
| Par | t 6: Answer These Quest | ons for R | eporting Purposes | | |
| 16. | What kind of debts do you have? | 16a. | | consumer debts? Consumer debts are d rsonal, family, or household purpose." | efined in 11 U.S.C. § 101(8) as "incurred by an |
| | | | ☐ No. Go to line 16b. | | Pusiness debts are debts that you incurred to obtain ugh the operation of the business or investment. It consumer debts or business debts 8. It that after any exempt property is excluded and administrative expenses bute to unsecured creditors? 0-5,000 |
| | | | Yes. Go to line 17. | | |
| | | 16b. | | | |
| | | | ☐ No. Go to line 16c. | | |
| | | | ☐ Yes. Go to line 17. | | |
| | | 16c. | State the type of debts you | owe that are not consumer debts or busing | ness debts |
| | | | | | |
| 17. | Are you filing under Chapter 7? | □ No. | I am not filing under Chapte | er 7. Go to line 18. | |
| | Do you estimate that after any exempt property is excluded and | ■ Yes. | | Do you estimate that after any exempt privailable to distribute to unsecured credito | |
| | administrative expenses | | ■ No | | e debts that you incurred to obtain the business or investment. business debts ppt property is excluded and administrative expenses reditors? 25,001-50,000 |
| | are paid that funds will be available for distribution to unsecured creditors? | | □Yes | | |
| 18. | How many Creditors do | ■ 1-49 | | 1 ,000-5,000 | □ 25 001-50 000 |
| | you estimate that you owe? | ■ 1-49 ■ 50-99 |) | ☐ 5001-10,000 | |
| | owe: | □ 100-1 | | □ 10,001-25,000 | ☐ More than100,000 |
| | | □ 200-9 | 199 | | |
| 19. | How much do you | \$0 - \$ | 550,000 | ☐ \$1,000,001 - \$10 million | □ \$500,000,001 - \$1 billion |
| | estimate your assets to be worth? | | 01 - \$100,000 | \$10,000,001 - \$50 million | |
| | | | ,001 - \$500,000 ,001 - \$1 million | □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million | |
| | | — \$500, | | | |
| 20. | How much do you estimate your liabilities | □ \$0 - \$ | | □ \$1,000,001 - \$10 million | |
| | to be? | | 001 - \$100,000 | | |
| | | | ,001 - \$500,000 ,001 - \$1 million | □ \$100,000,001 - \$500 million | _ |
| | | | • | | |
| Par | | | | | |
| For | you | I have ex | camined this petition, and I de | eclare under penalty of perjury that the inf | ormation provided is true and correct. |
| | | | | | |
| | | | | not pay or agree to pay someone who is he notice required by 11 U.S.C. § 342(b). | |
| | | I request | relief in accordance with the | chapter of title 11, United States Code, s | pecified in this petition. |
| | | bankrupt and 357 | tcy case can result in fines up 1. | | |
| | | Marisol | sol Pizano Pizano | Signature of Deb | otor 2 |
| | | Signatur | e of Debtor 1 | | |
| | | Executed | | Executed on | |
| | | | MM / DD / YYYY | N | אוא / טט / YYYY |

| Debtor 1 Marisol Pizano | | | Cas | se number (if known) |
|---|----------------|---|-----------------------|---|
| For your attorney, if you are represented by one | under Chapt | ter 7, 11, 12, or 13 of title 11, United Stat | es Code, and have e | informed the debtor(s) about eligibility to proceed explained the relief available under each chapter debtor(s) the notice required by 11 U.S.C. § 342(b) |
| If you are not represented by an attorney, you do not need to file this page. | | se in which § 707(b)(4)(D) applies, certify led with the petition is incorrect. | y that I have no knov | vledge after an inquiry that the information in the |
| . • | /s/ Vanesa | Pancic OSB | Date | July 18, 2019 |
| | Signature of | f Attorney for Debtor | | MM / DD / YYYY |
| | Vanesa Pa | ancic OSB #010828 | | |
| | Printed name | | | |
| | Pancic La | w | | |
| | Firm name | | | |
| | Vanesa Pa | ancic | | |
| | 5525 SW 1 | 185th Ave. | | |
| | | o, OR 97078 | | |
| | | City, State & ZIP Code | | |
| | | 503-356-0803 (Beaverton)/ | | vanesapancicmeier@comcast.net; |
| | Contact phone | 360-487-9935 (Vancouver) | Email address | panciclaw@comcast.net |
| | Contact prione | 300-701-3333 (Valicouvel) | EIIIali auuless | panoidiaw @comidast.net |

OSB #010828 OR Bar number & State

United States Bankruptcy CourtDistrict of Oregon

| In re | Marisol Pizano | | Case N | Jo | |
|--------|---|---|------------------------------------|------------------------|----------------------|
| III IC | - Marisor Fizario | Debtor(s) | Case is Chapte | | |
| | DISCLOSURE OF COMPE | ENSATION OF ATTOR | NEY FOR | DEBTOR(S) | |
| C | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 201 ompensation paid to me within one year before the file rendered on behalf of the debtor(s) in contemplation | ing of the petition in bankruptcy, | or agreed to be p | aid to me, for serv | |
| | For legal services, I have agreed to accept | | \$ | 1,000.00 | <u></u> |
| | Prior to the filing of this statement I have received | 1 | \$ | 600.00 | <u> </u> |
| | Balance Due | | | 400.00 | <u> </u> |
| 2. 7 | The source of the compensation paid to me was: | | | | |
| | ■ Debtor □ Other (specify): | | | | |
| 3. 7 | The source of compensation to be paid to me is: | | | | |
| | ■ Debtor □ Other (specify): | | | | |
| . 1 | • | a sa a | | | |
| 4. | I have not agreed to share the above-disclosed com- | npensation with any other person i | inless they are m | nembers and associ | ates of my law firm. |
| l | ☐ I have agreed to share the above-disclosed compen copy of the agreement, together with a list of the n | | | | of my law firm. A |
| 5.] | In return for the above-disclosed fee, I have agreed to | render legal service for all aspects | of the bankrupt | cy case, including: | |
| t c | Analysis of the debtor's financial situation, and rend Preparation and filing of any petition, schedules, state Representation of the debtor at the meeting of credit [Other provisions as needed] Negotiations with secured creditors to | atement of affairs and plan which itors and confirmation hearing, an | may be required d any adjourned | ; hearings thereof; | |
| | reaffirmation agreements and applicati 522(f)(2)(A) for avoidance of liens on h | ions as needed; preparation | | | |
| 6. I | By agreement with the debtor(s), the above-disclosed for Representation of the debtors in any dany other adversary proceeding. | | | ances, relief fror | n stay actions or |
| | | CERTIFICATION | | | |
| | certify that the foregoing is a complete statement of an ankruptcy proceeding. | ny agreement or arrangement for | payment to me for | or representation o | of the debtor(s) in |
| Jı | ıly 18, 2019 | /s/ Vanesa Pancic | OSB | | |
| | ate | Vanesa Pancic OS | | | |
| | | Signature of Attorney Pancic Law | V | | |
| | | Vanesa Pancic | | | |
| | | 5525 SW 185th Av | | | |
| | | Beaverton, OR 97 503-356-0803 (Bea | | 187-9935 (Vanco | uver) |
| | | Fax: 503-848-9613 | | | uver) |
| | | (Vancouver) | , | | |
| | | vanesapancicmei | | et; | |
| | | <u>panciclaw@comc</u> Name of law firm | ast.net | | |
| | | мате ој taw jirm | | | |

UNITED STATES BANKRUPTCY COURT DISTRICT OF OREGON

| | DISTRICT C | F OREGON | |
|--|--|--|--|
| In re Marisol Pizano | , | TER 7 INDIVIDUAL DEBTO | (If Known) PR'S* |
| Debtor(s) | , | EMENT OF INTENTION(S) 1 U.S.C. §521(a) | |
| MPORTANT NOTICES TO DEBTOR(S): 1. Complete, sign and file this form even if you have reditors are listed, make sure the certificate of service. 2. Failure to perform the intentions as to property statement 11 USC §341(a) may result in relief for the creations. | e is completed. ed below within 30 da | ays after the first date set for th | e Meeting of Creditors |
| PART A - Debts secured by property of the estate. (additional pages is necessary.) | Part A must be fully c | ompleted for each debt which | is secured by property of the estate. Attach |
| IF NONE - Check this box. | | | |
| Property No. 1 | | D 1 . D 4 . C | |
| Creditor's Name: | | Describe Property Secu | iring Debt: |
| Property will be (check one): □ SURRENDERED If retaining the property, I intend to (check at least of Redeem the property □ Reaffirm the debt □ Other. Explain (for example, avoid lien using 11) Property is (check one): □ CLAIMED AS EXEMBED ART B - Personal property subject to unexpired leadinges if necessary.) ■ IF NONE - Check this box. Property No. 1 Lessor's Name: | usc §522(f) Not clain | s of Part B must be completed | for each unexpired lease. Attach additional Lease will be assumed pursuant to 11 USC §365(p)(2) YES □ NO |
| Continuation sheets attached (if any). I DECLARE UNDER PENALTY OF PERJURY THAT INDICATES INTENTION AS TO ANY PROPERTY OF SECURING A DEBT AND/OR PERSONAL PROPERTY AN UNEXPIRED LEASE. DATE: July 18, 2019 | OF MY ESTATE | DOCUMENT AND LOCAL CREDITOR NAMED ABO DATE: July 18, 2019 | OSB #010828 |
| /s/ Marisol Pizano | | /s/ Vanesa Pancic OSE | |
| DEBTOR'S SIGNATURE JOINT DEBTOR'S SIGNATURE (If applicable) | | JOINT DEBTOR'S SIGNAT Vanesa Pancic OSB #4 360-487-9935 (Vancou PRINT OR TYPE SIGNER'S Vanesa Pancic 5525 SW 185th Ave. Beaverton, OR 97078 | URE (If applicable and no attorney) 010828 503-356-0803 (Beaverton)/ ver) S NAME & PHONE NO. |

521.05 (12/1/16) **Page 1**

NON-JUDICIAL REMEDY WHEN CONSUMER DEBTOR FAILS TO TIMELY PERFORM STATED INTENTIONS

Creditors, see <u>Local Form #715</u> [attached if this document was served on paper] if you wish information on how to obtain non-judicial relief from the automatic stay of 11 U.S.C. §362(a) as to your collateral.

OUESTIONS????

Call an attorney with questions about these procedures or the law. However, only call the debtor's attorney if you have questions about the debtor's intent as to your collateral.

| Fill | in this information to identify your cas | se: | | | |
|--------|--|---|--|---------------|--------------------------|
| | tor 1 Marisol Pizano | 30. | | | |
| Dok | First Name | Middle Name | Last Name | | |
| | tor 2 use if, filing) First Name | Middle Name | Last Name | | |
| Uni | ed States Bankruptcy Court for the: [| DISTRICT OF OREGON | ı | | |
| Cas | e number | | | | |
| (if kn | | | | _ | if this is an |
| | | | | amend | ded filing |
| ۰. | | | | | |
| | icial Form 106Sum | | 10 / 10 / 11 / 11 / 11 | | |
| | | | d Certain Statistical Information | | 12/15 |
| info | mation. Fill out all of your schedules | first; then complete the | are filing together, both are equally responsible e information on this form. If you are filing amen | | |
| | original forms, you must fill out a new | w Summary and check | the box at the top of this page. | | |
| Par | 1: Summarize Your Assets | | | | |
| | | | | Your as | ssets of what you own |
| 1. | Schedule A/B: Property (Official Form | 106Δ/B) | | | , |
| •• | 1a. Copy line 55, Total real estate, from | Schedule A/B | | \$ | 0.00 |
| | 1b. Copy line 62, Total personal proper | ty, from Schedule A/B | | \$ | 9,250.00 |
| | 1c. Copy line 63, Total of all property of | n Schedule A/B | | \$ | 9,250.00 |
| Par | 2: Summarize Your Liabilities | | | | |
| | | | | Your li | abilities |
| | | | | | t you owe |
| 2. | Schedule D: Creditors Who Have Claim | | (Official Form 106D) he bottom of the last page of Part 1 of Schedule D | \$ | 0.00 |
| _ | | , | 1 0 | ~ | |
| 3. | Schedule E/F: Creditors Who Have Un 3a. Copy the total claims from Part 1 (| secured Claims (Official priority unsecured claims | Form 106E/F) s) from line 6e of <i>Schedule E/F</i> | \$ | 240.00 |
| | 3b. Copy the total claims from Part 2 (| nonpriority unsecured cla | aims) from line 6j of Schedule E/F | \$ | 84,968.00 |
| | | | | | |
| | | | Your total liabilities | s \$ | 85,208.00 |
| | | | | | |
| Par | 3: Summarize Your Income and Ex | cpenses | | | |
| 4. | Schedule I: Your Income (Official Form Copy your combined monthly income for | | I | \$ | 2,200.00 |
| 5. | Schedule J: Your Expenses (Official Fo | | | \$ | 2,405.00 |
| Par | 4: Answer These Questions for Ac | Iministrative and Statis | stical Records | | |
| 6. | Are you filing for bankruptcy under (| Chapters 7, 11, or 13? | | | |
| | | • • • | neck this box and submit this form to the court with y | our other sch | nedules. |
| | Yes | | | | |
| 7. | What kind of debt do you have? | | | | |
| | | | lebts are those "incurred by an individual primarily fog for statistical purposes. 28 U.S.C. § 159. | r a personal, | family, or |

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

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Best Case Bankruptcy

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

2,162.25

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| From Part 4 on Schedule E/F, copy the following: | Total o | claim |
|--|---------|-----------|
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 240.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 67,547.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 67,787.00 |

| Fill in this info | rmation to identify your | case and this filing: | | | |
|---|---------------------------------------|--|------------------------------|---|---|
| Debtor 1 | Marisol Pizano | | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | | |
| United States B | ankruptcy Court for the: | DISTRICT OF OREGON | | | |
| Case number | _ | | _ | | ☐ Check if this is an amended filing |
| Official E | orm 106A/B | | | | |
| | · | ortv | | | |
| Schedu | <u>le A/B: Prop</u> | erty | | | 12/15 |
| information. If mo Answer every que | ore space is needed, attach a estion. | te as possible. If two married people a separate sheet to this form. On th , Land, or Other Real Estate You Ov | e top of any additional pag | | |
| 1. Do you own or | have any legal or equitable | interest in any residence, building, | , land, or similar property? | | |
| ■ No. Go to Pa | | | | | |
| _ | | | | | |
| ☐ Yes. where | is the property? | | | | |
| Part 2: Describe | e Your Vehicles | | | | |
| someone else di | rives. If you lease a vehicle | itable interest in any vehicles, vehicles, vehicles, vehicles, motorcycles | | | ehicles you own that |
| □ No | | | | | |
| ■ Yes | | | | | |
| 3.1 Make: | Ford F-150 | Who has an interest in th | e property? Check one | Do not deduct secured of the amount of any secure Creditors Who Have Clai | ed claims on Schedule D: |
| Year: | 1997 | Debtor 2 only | | Current value of the | Current value of the |
| Approxima | ate mileage: Over 3 | | only | entire property? | portion you own? |
| Other info | | At least one of the debt | ors and another | | |
| | er debtor. Has ructed title. | Check if this is committee (see instructions) | unity property | \$1,500.00 | \$1,500.00 |
| | | | | | |
| 3.2 Make: | Nissan | Who has an interest in th | e property? Check one | Do not deduct secured of | aims or exemptions. Put ed claims on <i>Schedule D:</i> |
| Model: | 240sx | Debtor 1 only | | Creditors Who Have Clair | |
| Year: | 1998 | Debtor 2 only | | Current value of the | Current value of the |
| • | | 70k Debtor 1 and Debtor 2 of | | entire property? | portion you own? |
| Other info | rmation: er debtor. | At least one of the debt | ors and another | | |
| value p | ei debioi. | Check if this is comm | unity property | \$1,000.00 | \$1,000.00 |

Official Form 106A/B Schedule A/B: Property page 1

| Debior 1 | Marisoi Pizai | no | | Case number (if known |) |
|---|---|---|--|-------------------------------------|--|
| | ake: Toyota odel: Corolla | | Who has an interest in the property? Check one Debtor 1 only | the amount of ar | ecured claims or exemptions. Put by secured claims on Schedule D: lave Claims Secured by Property. |
| Ap Ot | Year: 1/2 nom. title 1999 Approximate mileage: Other information: | | ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another | Current value o entire property? | |
| ve Tit br pu | ebtor's brother pehicle with his or tle in both the de tother's name fo uproses. No valu state. | wn money. ebtor's and r licensing | ☐ Check if this is community property (see instructions) | \$ | \$0.00 |
| | les: Boats, trailers, | | d other recreational vehicles, other vehicle tercraft, fishing vessels, snowmobiles, motorcy | | |
| .pages | s you have attache | ed for Part 2. Write | n for all of your entries from Part 2, includir | | \$2,500.00 |
| | | nal and Household Ite egal or equitable in | ems terest in any of the following items? | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| Exam □ No | | urnishings ces, furniture, linens | , china, kitchenware | | |
| | | Household goo | ds and furnishings | | \$2,000.00 |
| □ No | ples: Televisions ar including cell | | eo, stereo, and digital equipment; computers, p ledia players, games | orinters, scanners; music | collections; electronic devices |
| | | TV, Cell phones | etc | | \$1,000.00 |
| | other collection | figurines; paintings, ns, memorabilia, co | prints, or other artwork; books, pictures, or oth llectibles | er art objects; stamp, coi | n, or baseball card collections; |
| ☐ Yes | s. Describe | | | | |
| | musical instru | graphic, exercise, ar | d other hobby equipment; bicycles, pool tables | s, golf clubs, skis; canoes | and kayaks; carpentry tools; |
| _ | s. Describe | | | | |
| 10. Firea <i>Exar</i> ■ No | mples: Pistols, rifles | , shotguns, ammuni | tion, and related equipment | | |
| | s. Describe | | | | |

Official Form 106A/B Schedule A/B: Property page 2

| De | ebtor 1 Marisol Piz | ano | Cas | se number (if known) | |
|-----|---|--|--|--------------------------|--|
| | Clothes Examples: Everyday o □ No | lothes, furs, leather coats, designer wea | r, shoes, accessories | | |
| | Yes. Describe | | | | |
| | | 0 | | | ф 7 00 00 |
| | | Clothes | | | \$700.00 |
| | Jewelry Examples: Everyday j □ No ■ Yes. Describe | ewelry, costume jewelry, engagement rin Engagement ring | ngs, wedding rings, heirloom jewel | lry, watches, gems, g | old, silver \$3,000.00 |
| _ | | | | <u> </u> | |
| 14. | No | nd household items you did not alread | dy list, including any health aids | s you did not list | |
| | ☐ Yes. Give specific in | formation | | | |
| 15 | | of all of your entries from Part 3, incl number here | | u have attached | \$6,700.00 |
| Pa | rt 4: Describe Your Fina | ncial Assets | | | |
| Do | you own or have any | legal or equitable interest in any of th | e following? | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | □ No | have in your wallet, in your home, in a s | • | en you file your petitio | on |
| | ■ Yes | | | | |
| | | | | Cash | \$50.00 |
| 17. | | savings, or other financial accounts; cert . If you have multiple accounts with the s | | t unions, brokerage h | ouses, and other similar |
| | ☐ Yes | Ins | titution name: | | |
| | | or publicly traded stocks i, investment accounts with brokerage fir | ms, money market accounts | | |
| | ☐ Yes | Institution or issuer name: | | | |
| 19. | Non-publicly traded s joint venture ■ No | tock and interests in incorporated an | d unincorporated businesses, i | ncluding an interes | t in an LLC, partnership, and |
| | ☐ Yes. Give specific in | formation about them Name of entity: | % | of ownership: | |
| 20. | Negotiable instrumen | porate bonds and other negotiable and s include personal checks, cashiers' che ments are those you cannot transfer to so | d non-negotiable instruments cks, promissory notes, and mone | y orders. | |

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Official Form 106A/B

| De | ebtor 1 | Marisol Pizano | | Case number (if known) | |
|-----|------------------------|--|--|--------------------------------|--|
| | ☐ Yes. | Give specific information about the Issuer name | | | |
| 21. | | ment or pension accounts oles: Interests in IRA, ERISA, Keog | gh, 401(k), 403(b), thrift savings accounts, or other pe | nsion or profit-sharing plans | |
| | | List each account separately. Type of account | nt: Institution name: | | |
| 22. | Your s Examp | | eve made so that you may continue service or use from repaid rent, public utilities (electric, gas, water), telectric, | | rothers |
| | ■ No □ Yes. | | Institution name or individual: | | |
| 23. | _ | ties (A contract for a periodic paym | ent of money to you, either for life or for a number of | years) | |
| | ■ No □ Yes | Issuer name and de | escription. | | |
| 24. | 26 U.S. | ts in an education IRA, in an acc C. §§ 530(b)(1), 529A(b), and 529(| ount in a qualified ABLE program, or under a qua $(b)(1)$. | lified state tuition program | |
| | ■ No □ Yes | Institution name and | d description. Separately file the records of any intere | sts.11 U.S.C. § 521(c): | |
| 25. | | , equitable or future interests in | property (other than anything listed in line 1), and | rights or powers exercisal | ole for your benefit |
| | ■ No □ Yes. | Give specific information about th | em | | |
| 26. | | | secrets, and other intellectual property ites, proceeds from royalties and licensing agreemen | ts | |
| | | Give specific information about th | | | |
| | Examp ■ No | es, franchises, and other general of the second sec | enses, cooperative association holdings, liquor licens | es, professional licenses | |
| | | property owed to you? | GIII | | Current value of the |
| | , | p | | ! [| portion you own? On not deduct secured claims or exemptions. |
| 28. | □ No | funds owed to you Give specific information about the | em, including whether you already filed the returns an | d the tax years | |
| | | | 2019 Potential Tax Refunds | State & Federal | Unknown |
| | Examµ ■ No | support oles: Past due or lump sum alimony Give specific information | y, spousal support, child support, maintenance, divor | ce settlement, property settle | ment |
| | Exam _p ■ No | amounts someone owes you bles: Unpaid wages, disability insur benefits; unpaid loans you ma Give specific information | rance payments, disability benefits, sick pay, vacation ade to someone else | pay, workers' compensation | n, Social Security |
| | | | | | |

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Best Case Bankruptcy

Schedule A/B: Property

Official Form 106A/B

page 4

| De | ebtor 1 | Marisol Pizano | Case number (if known) | |
|-----|----------------|---|---|----------------------------|
| 31. | | ets in insurance policies oles: Health, disability, or life insurance; health sa | avings account (HSA); credit, homeowner's, or renter's insurar | nce |
| | ■ No | | | |
| | ☐ Yes. | Name the insurance company of each policy and Company name: | d list its value. Beneficiary: | Surrender or refund value: |
| | If you some of | terest in property that is due you from someo are the beneficiary of a living trust, expect proces one has died. Give specific information | one who has died eds from a life insurance policy, or are currently entitled to reco | eive property because |
| | | | | |
| 33. | | against third parties, whether or not you have bles: Accidents, employment disputes, insurance | ve filed a lawsuit or made a demand for payment claims, or rights to sue | |
| | ☐ Yes. | Describe each claim | | |
| - | Other o | contingent and unliquidated claims of every n | nature, including counterclaims of the debtor and rights to | set off claims |
| | Yes. | Describe each claim | | |
| | | Wages | | Unknown |
| 35. | Anv fir | nancial assets you did not already list | | |
| | ■ No | , | | |
| | ☐ Yes. | Give specific information | | |
| 36 | | the dollar value of all of your entries from Par art 4. Write that number here | t 4, including any entries for pages you have attached | \$50.00 |
| Pa | rt 5: De | scribe Any Business-Related Property You Own or | Have an Interest In. List any real estate in Part 1. | |
| _ | _ • | own or have any legal or equitable interest in any bu | usiness-related property? | |
| • | No. Go | to Part 6. | | |
| [| ☐ Yes. (| Go to line 38. | | |
| Pa | | scribe Any Farm- and Commercial Fishing-Related ou own or have an interest in farmland, list it in Part 1. | Property You Own or Have an Interest In. | |
| 46. | _ • | , , , | n any farm- or commercial fishing-related property? | |
| | | Go to Part 7. | | |
| | ⊔ Yes | . Go to line 47. | | |
| Pa | rt 7: | Describe All Property You Own or Have an Interes | st in That You Did Not List Above | |
| 53. | | have other property of any kind you did not ples: Season tickets, country club membership | already list? | |
| | | Give specific information | | |
| 54 | . Add 1 | he dollar value of all of your entries from Par | t 7. Write that number here | \$0.00 |
| | | | | |

Official Form 106A/B Schedule A/B: Property page 5

| Debtor 1 Marisol Pizano Case number (if known) | | | | |
|--|--|------------|------------------------------|------------|
| Part | 8: List the Totals of Each Part of this Form | | | |
| 55. | Part 1: Total real estate, line 2 | | | \$0.00 |
| 56. | Part 2: Total vehicles, line 5 | \$2,500.00 | | _ |
| 57. | Part 3: Total personal and household items, line 15 | \$6,700.00 | | |
| 58. | Part 4: Total financial assets, line 36 | \$50.00 | | |
| 59. | Part 5: Total business-related property, line 45 | \$0.00 | | |
| 60. | Part 6: Total farm- and fishing-related property, line 52 | \$0.00 | | |
| 61. | Part 7: Total other property not listed, line 54 | \$0.00 | | |
| 62. | Total personal property. Add lines 56 through 61 | \$9,250.00 | Copy personal property total | \$9,250.00 |
| 63. | Total of all property on Schedule A/B. Add line 55 + line 62 | | | \$9,250.00 |

Official Form 106A/B Schedule A/B: Property page 6

| Fill in this inforr | Fill in this information to identify your case: | | | | | | | |
|---|---|--------------------|-----------|--------------------------------------|--|--|--|--|
| Debtor 1 | Marisol Pizano | | | | | | | |
| | First Name | Middle Name | Last Name | | | | | |
| Debtor 2 | | | | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | | | | |
| United States Bankruptcy Court for the: | | DISTRICT OF OREGON | | | | | | |
| Case number | | | | ☐ Check if this is an amended filing | | | | |

Official Form 106C

Schedule C: The Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| | 3 | | | | | | | | |
|----|--|--------------------------------------|---|---|------------------------------------|--|--|--|--|
| | ■ You are claiming federal exemptions. 11 to | J.S.C. § 522(b)(2) | | | | | | | |
| 2. | For any property you list on Schedule A/B that you claim as exempt, fill in the information below. | | | | | | | | |
| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Am | ount of the exemption you claim | Specific laws that allow exemption | | | | |
| | | Copy the value from Schedule A/B | Che | eck only one box for each exemption. | | | | | |
| | 1997 Ford F-150 Over 350k miles Value per debtor. Has reconstructed | \$1,500.00 | | \$3,775.00 | 11 U.S.C. § 522(d)(2) | | | | |
| | title. Line from Schedule A/B: 3.1 | | | 100% of fair market value, up to any applicable statutory limit | | | | | |
| | 1998 Nissan 240sx 170k miles Value per debtor. | \$1,000.00 | | \$1,000.00 | 11 U.S.C. § 522(d)(5) | | | | |
| | Line from Schedule A/B: 3.2 | | | 100% of fair market value, up to any applicable statutory limit | | | | | |
| _ | Household goods and furnishings Line from Schedule A/B: 6.1 | \$2,000.00 | | \$2,000.00 | 11 U.S.C. § 522(d)(3) | | | | |
| | Line Iron Schedule AVD. 4.1 | | 100% of fair market value, up to any applicable statutory limit | | | | | | |
| | TV, Cell phones etc Line from Schedule A/B: 7.1 | \$1,000.00 | | \$1,000.00 | 11 U.S.C. § 522(d)(3) | | | | |
| | Ellie IIolii ooliloodie 702. | | | 100% of fair market value, up to any applicable statutory limit | | | | | |
| | Clothes Line from Schedule A/B: 11.1 | \$700.00 | | \$700.00 | 11 U.S.C. § 522(d)(3) | | | | |
| | Line Holli Gollodale 7VD. TTT | | | 100% of fair market value, up to any applicable statutory limit | | | | | |

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 2

| Debtor | 1 Marisol Pizano | | | Case number (if known) | |
|--------|--|--------------------------------------|---------|---|------------------------------------|
| | ef description of the property and line on hedule A/B that lists this property | Current value of the portion you own | Am | ount of the exemption you claim | Specific laws that allow exemption |
| | | Copy the value from Schedule A/B | Che | eck only one box for each exemption. | |
| | ngagement ring ne from Schedule A/B: 12.1 | \$3,000.00 | | \$1,600.00 | 11 U.S.C. § 522(d)(4) |
| LIII | le Hotti Schedule AVB. 12.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| | ngagement ring le from Schedule A/B: 12.1 | \$3,000.00 | | \$1,400.00 | 11 U.S.C. § 522(d)(5) |
| LIII | le Hotti Schedule AVB. 12.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| | Cash | \$50.00 | | \$50.00 | 11 U.S.C. § 522(d)(5) |
| LIII | e from <i>Schedule A/B</i> : 16.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| | ate & Federal: 2019 Potential Tax | Unknown | | \$1,500.00 | 11 U.S.C. § 522(d)(5) |
| | re from Schedule A/B: 28.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| | ages ae from <i>Schedule A/B</i> : 34.1 | Unknown | | \$2,100.00 | 11 U.S.C. § 522(d)(5) |
| LIII | le Hotti Schedule A/B. 34.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| | e you claiming a homestead exemption ubject to adjustment on 4/01/22 and every No Yes. Did you acquire the property cover No | 3 years after that for ca | ases fi | · | , |
| | Π Yes | | | | |

| Fill in this information to identify your case: | | | | | | | |
|---|----------------|--------------------|-----------|--------------------------------------|--|--|--|
| Debtor 1 | Marisol Pizano | | | | | | |
| | First Name | Middle Name | Last Name | | | | |
| Debtor 2 | | | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | | | |
| United States Bankruptcy Court for the: | | DISTRICT OF OREGON | | | | | |
| Case number | | | | | | | |
| (if known) | | | | ☐ Check if this is an amended filing | | | |

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

| Fill i | n this information to identify yo | our case: | | | | | | | |
|---|--|--|---|---|--|--|--|--|---------|
| Debt | or 1 Marisol Pizano |) | | | | | | | |
| | First Name | Midd | dle Name | Last Name | | | | | |
| Debt (Spous | or 2 se if, filing) First Name | Midd | dle Name | Last Name | | | | | |
| | ed States Bankruptcy Court for the | DISTRIC | T OF OREGON | | | | | | |
| Ornic | a diates bankruptey countries and | J. <u> </u> | 71 01 01 CINE CONT | | | | | | |
| Case (if know | e number | | | | | П | Chack | if this is a | n |
| (| , | | | | | | | ed filing | 11 |
| Be as any ex Sched left. At name Part 1. C 2. L ic p | cial Form 106E/F nedule E/F: Creditors complete and accurate as possible ecutory contracts or unexpired lead lule G: Executory Contracts and Unitule D: Creditors Who Have Claims stach the Continuation Page to this and case number (if known). 1: List All of Your PRIORITY on any creditors have priority unsecuted in the Continuation Page to this and case number (if known). 1: List All of Your PRIORITY on any creditors have priority unsecuted claim it is. If a claim ossible, list the claims in alphabetical cart 1. If more than one creditor holds for an explanation of each type of claims. | . Use Part 1 for ses that could expired Leases Secured by Propage. If you had unsecured (cured claims agaims. If a credit in has both prior order according a particular clair | recreditors with PRI result in a claim. As s (Official Form 106 perty. If more space ive no information of Claims gainst you? or has more than one ity and nonpriority ar to the creditor's nar n, list the other credit | ORITY claims and Part 2 fc Also list executory contract G). Do not include any cre ce is needed, copy the Part to report in a Part, do not f e priority unsecured claim, lis mounts, list that claim here a ne. If you have more than tw itors in Part 3. | s on Schedule A/B: I ditors with partially s you need, fill it out, ile that Part. On the t st the creditor separate and show both priority a | Property (Of secured clain number the op of any action of any action of any action of any action of and nonpriority of the secure of the secur | ficial Forms that a entries in dditional claim. For the amount of the am | m 106A/B) re listed in the boxe pages, wri each claim s. As much | listed, |
| | | | | | rotar ciaiiii | amount | | amount | ity |
| 2.1 | Internal Revenue Service |) | Last 4 digits of a | ccount number | \$0.00 | | \$0.00 | | \$0.00 |
| | Priority Creditor's Name Legal Notices PO Box 7346 | | When was the de | ebt incurred? | | - | | | |
| | Philadelphia, PA 19101-7 Number Street City State Zip Code | 346 e | As of the date yo | ou file, the claim is: Check a | II that apply | | | | |
| | Who incurred the debt? Check one. | | ☐ Contingent | , | | | | | |
| | ■ Debtor 1 only | | ☐ Unliquidated | | | | | | |
| | Debtor 2 only | | □ Disputed | | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | | • | Y unsecured claim: | | | | | |
| | ☐ At least one of the debtors and an | other | ☐ Domestic supp | | | | | | |
| | ☐ Check if this claim is for a com | | Taxes and cer | tain other debts you owe the | government | | | | |
| | Is the claim subject to offset? | amiy ucut | | th or personal injury while yo | - | | | | |
| | ■ No | | Other. Specify | | | | | | |
| | Yes | | Callot. Opcomy | Precautionary listing | ng | | | | |

| the claim is: Check cured claim: igations her debts you owe the ersonal injury while y 8 Taxes our other schedules. | e government rou were intoxicated | | \$0.0 |
|---|--|--|---|
| the claim is: Check ecured claim: igations her debts you owe the ersonal injury while y | e government rou were intoxicated | | |
| ecured claim: igations her debts you owe the ersonal injury while y 8 Taxes | e government rou were intoxicated | | |
| igations her debts you owe the ersonal injury while y 8 Taxes | ou were intoxicated | | |
| igations her debts you owe the ersonal injury while y 8 Taxes | ou were intoxicated | | |
| igations her debts you owe the ersonal injury while y 8 Taxes | ou were intoxicated | | |
| igations her debts you owe the ersonal injury while y 8 Taxes | ou were intoxicated | | |
| ner debts you owe the ersonal injury while y | ou were intoxicated | | |
| ersonal injury while y | ou were intoxicated | | |
| ersonal injury while y | ou were intoxicated | | |
| 8 Taxes | s each claim. If a creditor has | | |
| | s each claim. If a creditor has | | |
| our other schedules. | s each claim. If a creditor has | | |
| ve more than three i | nonpriority unsecured claims f | fill out the Continuation Total claim | J |
| unt number 690 | 7 | : | \$2,447.0 |
| ncurred? | | | - |
| e, the claim is: Che | ck all that apply | | |
| | | | |
| | | | |
| | | | |
| | | | |
| ΓY unsecured claim | 1: | | |
| | | | |
| | agreement or divorce that you | u did not | |
| | | | |
| is | and other similar debts | | |
| г | out of a separation a | | out of a separation agreement or divorce that you did not s |

| Debt | Marisol Pizano | Case number (if known) | |
|------|--|---|----------|
| 4.2 | Allied International Credit Co | Last 4 digits of account number | Unknown |
| | Nonpriority Creditor's Name 6800 Paragon Place, Ste 400 Richmond, VA 23230 | When was the debt incurred? | |
| | Number Street City State Zip Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | Dobligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | \square Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | ■ Other. Specify Collection for Key Bank | |
| 4.3 | Apelles | Last 4 digits of account number | Unknown |
| | Nonpriority Creditor's Name 3700 Corporate Dr.Ste 240 Columbus, OH 43231 | When was the debt incurred? | |
| | Number Street City State Zip Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | Debtor 1 only | ☐ Contingent | |
| | ☐ Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | \square Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | ■ Other. Specify Collection for Key Bank | |
| 4.4 | Bank of The West | Last 4 digits of account number | \$473.00 |
| | Nonpriority Creditor's Name Asset Recovery Department PO Box 8050 | When was the debt incurred? | |
| | Walnut Creek, CA 94596 Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | ☐ Yes | ■ Other. Specify Overdraft fees | |
| | | | |

| 1 Marisol Pizano | Case number (if known) | |
|--|---|------------|
| Barclays Bank Delaware Nonpriority Creditor's Name PO Box 8803 | Last 4 digits of account number 6767 When was the debt incurred? | \$2,012.00 |
| Wilmington, DE 19899-8803 | | |
| Number Street City State Zip Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | _ | |
| Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| Debtor 1 and Debtor 2 only | Disputed | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured claim: ☐ Student loans | |
| ☐ Check if this claim is for a community debt | | |
| Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| Yes | Other. Specify Credit card | |
| Capital One Bank USA NA | Last 4 digits of account number 4036 | \$971.00 |
| Nonpriority Creditor's Name | When we the debt incorred? | |
| Po Box 30281 Salt Lake City, UT 84130 | When was the debt incurred? | |
| Number Street City State Zip Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | | |
| Debtor 1 only | ☐ Contingent | |
| ☐ Debtor 2 only | ☐ Unliquidated | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | |
| lacksquare At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| Check if this claim is for a community | ☐ Student loans | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| Yes | ■ Other. Specify Credit card | |
| Capital One Bank USA NA | Last 4 digits of account number 5209 | \$1,852.00 |
| Nonpriority Creditor's Name | | Ψ1,002.00 |
| Po Box 30281 | When was the debt incurred? | |
| Salt Lake City, UT 84130 Number Street City State Zip Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | , as a me date year may and training. Shook an disk apply | |
| ■ Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | |
| debt | ☐ Obligations arising out of a separation agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims | |
| No | Debts to pension or profit-sharing plans, and other similar debts | |
| Yes | ■ Other. Specify Credit card | |

Schedule E/F: Creditors Who Have Unsecured Claims

| Debtor | Marisol Pizano | Case number (if known) | |
|----------|---|---|----------|
| 4.8 | Chase | Last 4 digits of account number | \$280.00 |
| | Nonpriority Creditor's Name Attn: Bankruptcy Dept PO Box 24696 Columbus, OH 43224 | When was the debt incurred? | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | No | Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | ■ Other. Specify Overdraft fees | |
| 4.9 | Convergent Outsourcing Nonpriority Creditor's Name | Last 4 digits of account number | \$0.00 |
| | 800 SW 39th St Renton, WA 98057 | When was the debt incurred? | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | |
| | ☐ Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | Student loans | |
| | debt Is the claim subject to offset? | Dobligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | ☐ Yes | ■ Other. Specify Collections for Sprint | |
| | | | |
| 4.1 0 | Credit One Bank Nonpriority Creditor's Name | Last 4 digits of account number 7864 | \$591.00 |
| | PO Box 98872 Las Vegas, NV 89193-8873 | When was the debt incurred? | |
| | Number Street City State Zip Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | Debtor 1 only | ☐ Contingent | |
| | ☐ Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | Disputed | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community debt | Student loans | |
| | Is the claim subject to offset? | Dobligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | □Yes | ■ Other. Specify Credit card | |
| | | • • • | |

| Marisol Pizano | Case number (if known) | |
|--|---|------------|
| Dept of Ed/Navient | Last 4 digits of account number 2013 | \$3,807.00 |
| Nonpriority Creditor's Name 123 Justison Street 3rd Floor | When was the debt incurred? | |
| Wilmington, DE 19801 Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| ■ Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | Student loans | |
| debt Is the claim subject to offset? | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| ☐ Yes | Other. Specify | |
| | Student loan | |
| Dept of Ed/Navient Nonpriority Creditor's Name | Last 4 digits of account number 2013 | \$8,800.00 |
| 123 Justison Street 3rd Floor | When was the debt incurred? | |
| Wilmington, DE 19801 Number Street City State Zip Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | no or the date year may also status of orlook directions, | |
| ■ Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | Student loans | |
| debt Is the claim subject to offset? | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| ■ No | \square Debts to pension or profit-sharing plans, and other similar debts | |
| ☐ Yes | Other. Specify | |
| | Student loan | |
| Dept of Ed/Navient Nonpriority Creditor's Name | Last 4 digits of account number 2013 | \$4,949.0 |
| 123 Justison Street 3rd Floor | When was the debt incurred? | |
| Wilmington, DE 19801 Number Street City State Zip Code | As of the data year file, the plains in Chapter all that apply | |
| Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| ■ Debtor 1 only | ☐ Contingent | |
| — Boblot 1 only | ☐ Unliquidated | |
| Debtor 2 only | • | |
| ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured claim: | |
| ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another | • | |
| ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt | Type of NONPRIORITY unsecured claim: ■ Student loans □ Obligations arising out of a separation agreement or divorce that you did not | |
| ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community | Type of NONPRIORITY unsecured claim: Student loans | |

Schedule E/F: Creditors Who Have Unsecured Claims

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| 1 Marisol Pizano | Case number (if known) | |
|--|--|------------|
| Dept of Ed/Navient | Last 4 digits of account number 2013 | \$7,383.00 |
| Nonpriority Creditor's Name 123 Justison Street 3rd Floor | When was the debt incurred? | |
| Wilmington, DE 19801 Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| ■ Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | Student loans | |
| debt Is the claim subject to offset? | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| No | Debts to pension or profit-sharing plans, and other similar debts | |
| ☐ Yes | Other. Specify | |
| | Student loan | |
| Dept of Ed/Navient Nonpriority Creditor's Name | Last 4 digits of account number 2014 | \$4,949.00 |
| 123 Justison Street 3rd Floor | When was the debt incurred? | |
| Wilmington, DE 19801 Number Street City State Zip Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | The state year me, and statement choose an anatoppy | |
| ■ Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | Student loans | |
| debt Is the claim subject to offset? | $\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| ■ No | Debts to pension or profit-sharing plans, and other similar debts | |
| ☐ Yes | Other. Specify | |
| | Student loan | |
| Dept of Ed/Navient Nonpriority Creditor's Name | Last 4 digits of account number 2014 | \$7,231.00 |
| 123 Justison Street 3rd Floor | When was the debt incurred? | |
| Wilmington, DE 19801 Number Street City State Zip Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| ■ Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| Debtor 1 and Debtor 2 only | □ Disputed | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ■ Student loans | |
| debt | Obligations arising out of a separation agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims | |
| ■ No | Debts to pension or profit-sharing plans, and other similar debts | |
| Yes | ☐ Other. Specify | |

Schedule E/F: Creditors Who Have Unsecured Claims

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| 1 Marisol Pizano | Case number (if known) | |
|--|--|------------|
| Dept of Ed/Navient | Last 4 digits of account number 2014 | \$6,027.00 |
| Nonpriority Creditor's Name 123 Justison Street 3rd Floor | When was the debt incurred? | |
| Wilmington, DE 19801 Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| ■ Debtor 1 only | ☐ Contingent | |
| ☐ Debtor 2 only | ☐ Unliquidated | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | Student loans | |
| debt Is the claim subject to offset? | $\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| No | Debts to pension or profit-sharing plans, and other similar debts | |
| □ Yes | Other. Specify | |
| | Student loan | |
| Dept of Ed/Navient Nonpriority Creditor's Name | Last 4 digits of account number 2014 | \$8,531.00 |
| 123 Justison Street 3rd Floor | When was the debt incurred? | |
| Wilmington, DE 19801 Number Street City State Zip Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | The state year me, and statement choose an anatoppy | |
| ■ Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | Student loans | |
| debt Is the claim subject to offset? | $\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| ■ No | Debts to pension or profit-sharing plans, and other similar debts | |
| Yes | Other. Specify | |
| | Student loan | |
| Dept of Ed/Navient Nonpriority Creditor's Name | Last 4 digits of account number 2015 | \$5,479.00 |
| 123 Justison Street 3rd Floor | When was the debt incurred? | |
| Wilmington, DE 19801 Number Street City State Zip Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | As of the date you me, the claim is. Oneok an that apply | |
| ■ Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ■ Student loans | |
| debt | Obligations arising out of a separation agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims | |
| ■ No | Debts to pension or profit-sharing plans, and other similar debts | |
| ☐ Yes | Other. Specify | |

Schedule E/F: Creditors Who Have Unsecured Claims

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| 1 Marisol Pizano | Case number (if known) | |
|--|--|------------|
| Dept of Ed/Navient | Last 4 digits of account number 2015 | \$3,013.00 |
| Nonpriority Creditor's Name 123 Justison Street 3rd Floor | When was the debt incurred? | |
| Wilmington, DE 19801 Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| ■ Debtor 1 only | ☐ Contingent | |
| ☐ Debtor 2 only | ☐ Unliquidated | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | Student loans | |
| debt Is the claim subject to offset? | $\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| ■ No | \square Debts to pension or profit-sharing plans, and other similar debts | |
| □Yes | Other. Specify | |
| | Student loan | |
| Dept of Ed/Navient Nonpriority Creditor's Name | Last 4 digits of account number | \$3,442.00 |
| 123 Justison Street 3rd Floor | When was the debt incurred? | |
| Wilmington, DE 19801 Number Street City State Zip Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | As of the date you file, the dain is. Offect all that apply | |
| ■ Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| Debtor 1 and Debtor 2 only | □ Disputed | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | Student loans | |
| debt Is the claim subject to offset? | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| ■ No | \square Debts to pension or profit-sharing plans, and other similar debts | |
| Yes | Other. Specify | |
| | Student loan | |
| Dept of Ed/Navient Nonpriority Creditor's Name | Last 4 digits of account number | \$3,386.00 |
| 123 Justison Street 3rd Floor | When was the debt incurred? | |
| | | |
| Wilmington, DE 19801 | | |
| Number Street City State Zip Code | As of the date you file, the claim is: Check all that apply | |
| Number Street City State Zip Code Who incurred the debt? Check one. | | |
| Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only | ☐ Contingent | |
| Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only | ☐ Contingent ☐ Unliquidated | |
| Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | ☐ Contingent | |
| Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another | ☐ Contingent ☐ Unliquidated ☐ Disputed | |
| Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | ☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim: | |
| Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt | ☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim: ■ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not | |

Schedule E/F: Creditors Who Have Unsecured Claims

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| ^{r 1} Marisol Pizano | Case number (if known) | |
|--|---|----------|
| Dept of Ed/Navient | Last 4 digits of account number 2916 | \$550.00 |
| Nonpriority Creditor's Name 123 Justison Street 3rd Floor | When was the debt incurred? | |
| Wilmington, DE 19801 Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured claim: | |
| At least one of the debtors and another | Student loans | |
| ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| □ Yes | ☐ Other. Specify | |
| l res | Student loan | |
| | otadoni iodii | |
| Johnson Mark LLC Nonpriority Creditor's Name | Last 4 digits of account number 6448 | \$0.00 |
| Attorneys at Law 901 N Brutscher Street, D PMB 401 | When was the debt incurred? | |
| Newberg, OR 97132 Number Street City State Zip Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | no of the date you me, the stating to officer air that appry | |
| ■ Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| ■ No | \square Debts to pension or profit-sharing plans, and other similar debts | |
| Yes | ■ Other. Specify LLC | |
| Kaiser Permanente Northwest | Last 4 digits of account number | Unknown |
| Nonpriority Creditor's Name 7201 N Interstate Portland. OR 97217-5523 | When was the debt incurred? | |
| Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| ■ Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | |
| debt | Obligations arising out of a separation agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims | |
| ■ No | Debts to pension or profit-sharing plans, and other similar debts | |
| Yes | Other. Specify Medical | |

Schedule E/F: Creditors Who Have Unsecured Claims

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| Debtor | 1 Marisol Pizano | Case number (if known) | |
|--------|--|--|----------|
| 4.2 | Key Bank | Last 4 digits of account number | \$0.00 |
| U | Nonpriority Creditor's Name Mail Code: OH-01-51-0633 PO Box 4825 | When was the debt incurred? | |
| | Cleveland, OH 44101-4825 Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | |
| | ☐ Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | \square Debts to pension or profit-sharing plans, and other similar debts | |
| | ☐ Yes | Other. Specify Notice | |
| 4.2 | Macy's/DSNB | Last 4 digits of account number | \$250.00 |
| | Nonpriority Creditor's Name Bankruptcy Processing PO Box 8053 | When was the debt incurred? | |
| | Mason, OH 45040 | A control of the cont | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | |
| | ☐ Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | No | \square Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | ■ Other. Specify Misc debt | |
| 4.2 | OnPoint Community Credit Union Nonpriority Creditor's Name | Last 4 digits of account number | \$500.00 |
| | PO Box 3750 Portland, OR 97208 | When was the debt incurred? | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | |
| | ☐ Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | ■ Other. Specify Overdraft fees | |
| | | · · · · <u></u> | |

Schedule E/F: Creditors Who Have Unsecured Claims

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| 1 Marisol Pizano | Case number (if known) | |
|--|---|----------|
| Planet Fitness | Last 4 digits of account number | \$200.00 |
| Nonpriority Creditor's Name 1001 SE Tualatin Valley Hwy Ste | When was the debt incurred? | , |
| B15 | | |
| Hillsboro, OR 97123 Number Street City State Zip Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | | |
| ■ Debtor 1 only | ☐ Contingent | |
| ☐ Debtor 2 only | ☐ Unliquidated | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| No | Debts to pension or profit-sharing plans, and other similar debts | |
| Yes | ■ Other. Specify Gym memerbship | |
| Portfolio Recovery Associates LLC | Last 4 digits of account number 6767 | \$0.00 |
| Nonpriority Creditor's Name 120 Corporate Blvd Norfolk, VA 23502 | When was the debt incurred? | · |
| Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| ■ Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| ■ No | Debts to pension or profit-sharing plans, and other similar debts | |
| Yes | ■ Other. Specify Collections for Barclays Bank Delaware. | |
| Portfolio Recovery Associates LLC | Last 4 digits of account number 4036 | \$0.00 |
| Nonpriority Creditor's Name 120 Corporate Blvd | When was the debt incurred? | |
| Norfolk, VA 23502 Number Street City State Zip Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | | |
| ■ Debtor 1 only | ☐ Contingent | |
| ☐ Debtor 2 only | ☐ Unliquidated | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| ■ No | Debts to pension or profit-sharing plans, and other similar debts | |
| Yes | ■ Other. Specify Collections for Capital One Bank USA NA. | |

Schedule E/F: Creditors Who Have Unsecured Claims

| Portfolio Recovery Associates LLC | Last 4 digits of account number 5209 | \$0.0 |
|--|---|------------|
| Nonpriority Creditor's Name 120 Corporate Blvd Norfolk, VA 23502 | When was the debt incurred? | |
| Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community debt | Student loans | |
| s the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| No | Debts to pension or profit-sharing plans, and other similar debts | |
| ☐ Yes | ■ Other. Specify Collections for Capital One Bank USA NA. | |
| Professional Credit Service Nonpriority Creditor's Name | Last 4 digits of account number | \$1,860.00 |
| PO Box 7548 Springfield, OR 97475-0039 | When was the debt incurred? | |
| Number Street City State Zip Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | | |
| Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | Unliquidated | |
| Debtor 1 and Debtor 2 only | Disputed | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured claim: ☐ Student loans | |
| ☐ Check if this claim is for a community debt | ☐ Obligations arising out of a separation agreement or divorce that you did not | |
| s the claim subject to offset? | report as priority claims | |
| No | Debts to pension or profit-sharing plans, and other similar debts | |
| Yes | ■ Other. Specify Collections for Providence St Vincent | |
| Prog Leasing LLC | Last 4 digits of account number | \$1,019.00 |
| Nonpriority Creditor's Name 256 West Data Driver | When was the debt incurred? | |
| Draper, UT 84020 Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| Check if this claim is for a community | ☐ Student loans | |
| debt s the claim subject to offset? | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| No | Debts to pension or profit-sharing plans, and other similar debts | |
| ☐ Yes | ■ Other. Specify Charge account | |

Schedule E/F: Creditors Who Have Unsecured Claims

Page 13 of 15

| or 1 Marisol Pizano Case number (if known) | | | | | |
|--|---|---------------|--|--|--|
| Branidana a Haakk 0 Camiaaa | | * 0.00 | | | |
| Providence Health & Services Nonpriority Creditor's Name | Last 4 digits of account number | \$0.00 | | | |
| Business Office PO Box 3299 | iness Office When was the debt incurred? | | | | |
| Portland, OR 97208-3299 | | | | | |
| Number Street City State Zip Code | As of the date you file, the claim is: Check all that apply | | | | |
| Who incurred the debt? Check one. | | | | | |
| ■ Debtor 1 only | ☐ Contingent | | | | |
| □ Debtor 2 only □ Unliquidated | | | | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | |
| \square At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | | | | |
| ☐ Check if this claim is for a community | Student loans | | | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | | |
| No | \square Debts to pension or profit-sharing plans, and other similar debts | | | | |
| Yes | ■ Other. Specify Medical - assigned to Professional Credit Service | | | | |
| Sprint | Last 4 digits of account number 0016 | \$1,844.00 | | | |
| Nonpriority Creditor's Name Po Box 54977 | When was the debt incurred? | | | | |
| Los Angeles, CA 90054-0977 Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | | | | |
| ■ Debtor 1 only | ☐ Contingent | | | | |
| Debtor 2 only | ☐ Unliquidated | | | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | | | | |
| ☐ Check if this claim is for a community | ☐ Student loans | | | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | | |
| ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | | | | |
| ☐ Yes | ■ Other Specify Service | | | | |
| Verizon Wireless | Last 4 digits of account number 5680 | \$3,122.00 | | | |
| Nonpriority Creditor's Name PO Box 650051 | When was the debt incurred? | · | | | |
| Dallas, TX 75265 Number Street City State Zip Code | As of the date you file, the claim is: Check all that apply | | | | |
| Who incurred the debt? Check one. | As of the date you me, the diam is. Officer all that apply | | | | |
| ■ Debtor 1 only | ☐ Contingent | | | | |
| Debtor 2 only | ☐ Unliquidated | | | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | | | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | | | | |
| ☐ Check if this claim is for a community | Student loans | | | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | | |
| | <u> </u> | | | | |
| ■ No | Debts to pension or profit-sharing plans, and other similar debts | | | | |

Schedule E/F: Creditors Who Have Unsecured Claims

Page 14 of 15

| Yamhill County Circuit Court | Last 4 digits of account number 6448 | \$0.0 | | | |
|---|---|-------|--|--|--|
| Nonpriority Creditor's Name Case No: 18CV56448 535 E 5th Street | When was the debt incurred? | | | | |
| McMinnville, OR 97128 Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | | | | |
| Debtor 1 only | ☐ Contingent | | | | |
| ☐ Debtor 2 only | ☐ Unliquidated | | | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | | | | |
| ☐ Check if this claim is for a community | ☐ Student loans | | | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | | |
| ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | | | | |
| Yes | Civil claim filed by Portfolio Recovery Other. Specify Associates LLC | | | | |

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

| | | | | Total Claim |
|--------------|-----|---|-----|-----------------|
| | 6a. | Domestic support obligations | 6a. | \$ 0.00 |
| Total claims | | | | |
| from Part 1 | 6b. | Taxes and certain other debts you owe the government | 6b. | \$ 240.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$ 0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ 0.00 |
| | 6e. | Total Priority. Add lines 6a through 6d. | 6e. | \$ 240.00 |
| | | | | Total Claim |
| | 6f. | Student loans | 6f. | \$ 67,547.00 |
| Total claims | | | | |
| from Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ 0.00 |
| | 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$ 0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ 17,421.00 |
| | 6j. | Total Nonpriority. Add lines 6f through 6i. | 6j. | \$ 84,968.00 |

| Fill in this infor | mation to identify your | case: | | |
|---------------------|--------------------------|--------------------|-----------|--------------------------------------|
| Debtor 1 | Marisol Pizano | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | DISTRICT OF OREGON | | |
| Case number _ | | | | ☐ Check if this is an amended filing |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| Number Street Street ZIP Code | | Person or | r company with Name, Numbe | whom you have the | contract or lease | State what the contract or lease is for |
|--|-----|-----------|-------------------------------|-------------------|-------------------|---|
| Number Street City State ZIP Code 2.2 Name Number Street City State ZIP Code 2.3 Name City State ZIP Code 2.4 Name Number Street City State ZIP Code 2.5 Name Number Street | 2.1 | | | | | |
| City State ZIP Code 2.2 Name Number Street City State ZIP Code 2.3 Name City State ZIP Code 2.4 Name Number Street City State ZIP Code 2.5 Name Number Street | | Name | | | | _ |
| Number Street State ZIP Code | | Number | Street | | | |
| Number Street City State ZIP Code 2.3 Name Number Street City State ZIP Code 2.4 Name Number Street City State ZIP Code 2.5 Name Number Street | | City | | State | ZIP Code | <u> </u> |
| Number Street City State ZIP Code 2.3 Name Number Street City State ZIP Code 2.4 Name Number Street City State ZIP Code 2.5 Name Number Street Number Street Street | 2.2 | | | | | |
| City State ZIP Code 2.3 Name Number Street City State ZIP Code 2.4 Name Number Street City State ZIP Code 2.5 Name Number Street | | Name | | | | |
| 2.3 Name Number Street State ZIP Code 2.4 Name Number Street State ZIP Code 2.5 Name Name Street State ZIP Code 2.5 Name Name Street Street State ZIP Code 2.6 Name Street Street | | Number | Street | | | |
| 2.3 Name Number Street State ZIP Code 2.4 Name Number Street State ZIP Code 2.5 Name Name Street State ZIP Code 2.5 Name Name Street Street State ZIP Code 2.6 Name Street Street | | City | | State | 7ID Codo | <u> </u> |
| Number Street City State ZIP Code 2.4 Name Number Street City State ZIP Code 2.5 Name Number Street Street Number Street | 2.3 | City | | State | ZIF Code | |
| City State ZIP Code 2.4 Name Number Street City State ZIP Code 2.5 Name Number Street | | Name | | | | _ |
| 2.4 Name Number Street State ZIP Code | | Number | Street | | | |
| 2.4 Name Number Street State ZIP Code | | City | | State | ZIP Code | <u> </u> |
| Number Street City State ZIP Code 2.5 Name Number Street | 2.4 | | | | | |
| City State ZIP Code 2.5 Name Number Street | | Name | | | | _ |
| 2.5 Name Number Street | | Number | Street | | | |
| 2.5 Name Number Street | | City | | State | ZIP Code | <u> </u> |
| Number Street | 2.5 | | | | | |
| | | Name | | | | _ |
| | | Number | Stroot | | | _ |
| City State ZIP Code | | | Succi | | | |
| | | City | | State | ZIP Code | _ |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

Page 1 of 1

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| Fill in this | s information to identify your | case: | | | |
|-----------------------------|--|--|--------------------------------|---|---|
| Debtor 1 | Marisol Pizano | | | | |
| | First Name | Middle Name | Last Name | _ | |
| Debtor 2 (Spouse if, fil | ing) First Name | Middle Name | Last Name | | |
| United Sta | ates Bankruptcy Court for the: | DISTRICT OF OREGO | N | | |
| Case num | nber | | | | |
| (if known) | | | | | Check if this is an amended filing |
| Officia | l Form 106H | | | | |
| | dule H: Your Cod | lebtors | | | 12/15 |
| fill it out, a your name | | boxes on the left. Attac). Answer every question | h the Additional Page to n. | o this page. On the top | eeded, copy the Additional Page, o of any Additional Pages, write |
| 1. 50 | you have any occupions. (iii | you are ming a joint case, | do not list citrici spouse | as a couchion. | |
| ■ No □ Ye | | | | | |
| | thin the last 8 years, have yo na, California, Idaho, Louisiana | | | | |
| | . Go to line 3. s. Did your spouse, former spo | use, or legal equivalent liv | e with you at the time? | | |
| in line Form | e 2 again as a codebtor only | if that person is a guarar | ntor or cosigner. Make s | sure you have listed th | g with you. List the person shown ne creditor on Schedule D (Official Schedule E/F, or Schedule G to fill |
| | Column 1: Your codebtor Name, Number, Street, City, State and 2 | IP Code | | Column 2: The cre Check all schedule | editor to whom you owe the debt es that apply: |
| 3.1 | | | | ☐ Schedule D, line | e |
| <u> </u> | Name | | | ☐ Schedule E/F, I | |
| | | | | ☐ Schedule G, lin | e |
| | Number Street City | State | ZIP Code | _ | |
| 3.2 | | | | ☐ Schedule D, line | Δ |
| J.2 | Name | | | _ ☐ Schedule E/F, I | |
| | | | | ☐ Schedule G, lin | |
| | Number Street | | | _ | |
| | City | State | ZIP Code | | |

Schedule H: Your Codebtors

| | in this information to identify your | | | | | | | | | | | |
|--------------------|--|--|-----------------|--------------|------|------|--------------|-------------------|--|----------------------|----------|---------|
| Dei | btor 1 Marisol Piz | ano | | | | | | | | | | |
| | btor 2 | | | | | | | | | | | |
| Uni | ited States Bankruptcy Court for th | e: DISTRICT OF OREG | ON | | | | | | | | | |
| | se number nown) | | - | | | | | amende ippleme | d filing nt showing as of the fo | | | hapter |
| 0 | fficial Form 106I | | | | | | MM | / DD/ Y | YYY | | | |
| S | chedule I: Your Ind | come | | | | | | | | | | 12/15 |
| spo atta Par | plying correct information. If youse. If you are separated and youch a separate sheet to this form The separate sheet to this form The separate sheet to this form | our spouse is not filing w . On the top of any additi | ith you, do not | include info | rma | tioı | n about yo | our spo | use. If mo | ore spac | e is ne | eeded, |
| 1. | Fill in your employment information. | | Debtor 1 | | | | D | ebtor 2 | or non-fil | ling spo | use | |
| | If you have more than one job, | Employment status | ■ Employed | i | | | |] Emplo | yed | | | |
| | attach a separate page with information about additional | Employment status | ☐ Not emplo | oyed | | | | Not er | nployed | | | |
| | employers. | Occupation | Administra | ntive | | | | | | | | |
| | Include part-time, seasonal, or self-employed work. | Employer's name | Cedar Cou | nseling Ce | nter | • | | | | | | |
| | Occupation may include student or homemaker, if it applies. | Employer's address | Beaverton | , OR | | | | | | | | |
| | | How long employed t | here? 4 | years | | | | _ | | | | |
| Pai | rt 2: Give Details About Mo | onthly Income | | | | | | | | | | |
| spoi | imate monthly income as of the use unless you are separated. | • | | | | | | | | · | | - |
| - | e space, attach a separate sheet t | | | madon lor al | CIII | JiOy | yers for the | at persor | i on the iii | iles belov | v. II yc | ou neeu |
| | | | | | | 1 | For Debto | or 1 | | otor 2 or ng spou | | |
| 2. | List monthly gross wages, sal deductions). If not paid monthly | | | | | \$_ | 2,60 | 00.00 | \$ | ı | N/A | |
| 3. | Estimate and list monthly ove | rtime pay. | | 3 | . + | \$_ | | 0.00 | +\$ | | N/A | |

Official Form 106I Schedule I: Your Income page 1

Calculate gross Income. Add line 2 + line 3.

2,600.00

N/A

| Debt | or 1 | Marisol Pizano | | | | Case | number (if kr | nown) | | | | |
|------|---------------|--|--|---------------------------------|-------|-------|---------------|-------|-------|------------------------|-----------------|------------------|
| | | | | | | For | Debtor 1 | | | r Debtor n-filing s | | |
| | Cop | y line 4 here | | | 4. | \$ | 2,600 | 0.00 | \$_ | 9 | N/A | _ |
| 5. | List | all payroll deduct | ions: | | | | | | | | | |
| ٥. | 5a. | | and Social Security deductions | | 5a. | \$ | 400 | 0.00 | \$ | | N/A | |
| | 5b. | | ributions for retirement plans | | 5b. | \$_ | | 0.00 | \$_ | | N/A | _ |
| | 5c. | • | ibutions for retirement plans | | 5c. | \$ | | 0.00 | \$ | | N/A | _ |
| | 5d. | Required repays | ments of retirement fund loans | | 5d. | \$ | (| 0.00 | \$ | | N/A | _ |
| | 5e. | Insurance | | | 5e. | \$ | C | 0.00 | \$ | | N/A | _ |
| | 5f. | Domestic support | ort obligations | | 5f. | \$ | | 0.00 | \$_ | | N/A | _ |
| | 5g. | Union dues | | | 5g. | \$_ | | 0.00 | \$_ | | N/A | _ |
| | 5h. | Other deduction | ns. Specify: | | 5h.+ | + \$_ | | 0.00 | + \$_ | | N/A | _ |
| 6. | Add | the payroll deduc | ctions. Add lines 5a+5b+5c+5d+5e+5f+5g- | ⊦5h. | 6. | \$ | 400 | 0.00 | \$_ | | N/A | _ |
| 7. | Cal | culate total month | ly take-home pay. Subtract line 6 from line | 9 4. | 7. | \$_ | 2,200 | 0.00 | \$_ | | N/A | _ |
| 8. | List 8a. | Net income from profession, or fa Attach a stateme receipts, ordinary | nt for each property and business showing and necessary business expenses, and the | gross | | | | | | | | |
| | | monthly net incor | | | 8a. | \$ | | 0.00 | \$_ | | N/A | _ |
| | 8b. | Interest and div | | | 8b. | \$ | (| 0.00 | \$_ | | N/A | _ |
| | 8c. | regularly receive Include alimony, | payments that you, a non-filing spouse, e spousal support, child support, maintenanc property settlement. | e, divorce | 8c. | \$ | | 0.00 | \$ | | N/A | |
| | 8d. | Unemployment | | | 8d. | \$- | | 0.00 | \$- | | N/A | _ |
| | 8e. | Social Security | | | 8e. | \$_ | | 0.00 | \$_ | | N/A | _ |
| | 8f. | Include cash ass that you receive, | ent assistance that you regularly receive istance and the value (if known) of any non such as food stamps (benefits under the Since Program) or housing subsidies. | -cash assistance upplemental | 8f. | \$ | (| 0.00 | \$ | | N/A | _ |
| | 8g. | Pension or retir | ement income | | 8g. | \$ | | 0.00 | \$ | | N/A | _ |
| | 8h. | Other monthly in | ncome. Specify: | | 8h.+ | + \$_ | C | 0.00 | + \$_ | | N/A | = |
| 9. | Add | all other income. | Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | | 9. | \$ | (| 0.00 | \$_ | | N// | 4 |
| 10. | | • | ome. Add line 7 + line 9. 0 for Debtor 1 and Debtor 2 or non-filing sp | 10 pouse. |). \$ | | 2,200.00 | + \$ | | N/A | = \$ _ | 2,200.00 |
| 11. | Inclu othe | ude contributions from the friends or relative not include any amo | contributions to the expenses that you om an unmarried partner, members of your s. bunts already included in lines 2-10 or amou | household, your de | epen | | | | | Schedule | e J. | 0.00 |
| 12. | | e that amount on th | e last column of line 10 to the amount in ee Summary of Schedules and Statistical St | | | | | | | э. 12. | \$ | 2,200.00 |
| 13. | Do y | you expect an incr No. Yes. Explain: | rease or decrease within the year after yo | ou file this form? | | | | | | | Combi monthl | ned ly income |
| | | • | l | | | | | | | | | |

Official Form 106l Schedule I: Your Income page 2

| Fill | l in this information to identify your case: | | | | |
|------------|--|---|----------------|-------------------|-------------------------------|
| Deb | btor 1 Marisol Pizano | | Che | ck if this is: | |
| | | | | An amended filing | |
| | btor 2 | | | | ving postpetition chapter |
| (Spo | pouse, if filing) | | | 13 expenses as of | the following date: |
| Unit | ited States Bankruptcy Court for the: DISTRICT OF ORE | GON | | MM / DD / YYYY | |
| Cas | se number | | | | |
| (If kı | known) | | | | |
| Oi | official Form 106J | | | | |
| Sc | chedule J: Your Expenses | | | | 12/15 |
| Be info | e as complete and accurate as possible. If two mark formation. If more space is needed, attach another mber (if known). Answer every question. | | | | r supplying correct |
| | rt 1: Describe Your Household | | | | |
| 1. | Is this a joint case? | | | | |
| | No. Go to line 2. | | | | |
| | ☐ Yes. Does Debtor 2 live in a separate househ | old? | | | |
| | □ No | | | | |
| | ☐ Yes. Debtor 2 must file Official Form 106 | J-2, Expenses for Separate Ho | usehold of Deb | otor 2. | |
| 2. | Do you have dependents? ■ No | | | | |
| | □ 1 C3. | nformation for Dependent's redent Deptor 1 or Del | | Dependent's age | Does dependent live with you? |
| | Do not state the | | | | □ No |
| | dependents names. | | | | ☐ Yes |
| | | | | | □ No |
| | | | | | ☐ Yes |
| | | | | | □ No |
| | | | | | ☐ Yes |
| | | | | | □ No □ Yes |
| 3. | Do your expenses include | | | | □ res |
| 0. | expenses of people other than yourself and your dependents? | | | | |
| Par | rt 2: Estimate Your Ongoing Monthly Expenses | • | | | |
| Est exp | timate your expenses as of your bankruptcy filing penses as of a date after the bankruptcy is filed. If plicable date. | date unless you are using thi | | | |
| the | clude expenses paid for with non-cash governmen e value of such assistance and have included it on fficial Form 106I.) | | | Your expe | enses |
| (Un | molai i Ollii 100i.j | | | | |
| 4. | The rental or home ownership expenses for you payments and any rent for the ground or lot. | r residence. Include first mortg | age 4. S | \$ | 400.00 |
| | If not included in line 4: | | | | |
| | 4a. Real estate taxes | | 4a. S | \$ | 0.00 |
| | 4b. Property, homeowner's, or renter's insurance | | 4b. S | · | 0.00 |
| | 4c. Home maintenance, repair, and upkeep expe | | 4c. S | \$ | 0.00 |
| | 4d. Homeowner's association or condominium du | | | \$ | 0.00 |
| 5. | Additional mortgage payments for your residence | ce, such as home equity loans | 5. \$ | \$ | 0.00 |

| Debto | Marisol Pizano | Case num | nber (if known) | |
|-------|--|--------------|-----------------|-------------------------------|
| 6. | Utilities: | | | |
| - | 6a. Electricity, heat, natural gas | 6a. | \$ | 50.00 |
| | 6b. Water, sewer, garbage collection | 6b. | · - | 50.00 |
| | 6c. Telephone, cell phone, Internet, satellite, and cable services | 6c. | · | 50.00 |
| | 6d. Other. Specify: Cell phone | 6d. | · | 200.00 |
| | Food and housekeeping supplies | | \$ | |
| | Childcare and children's education costs | 7. 8. | · | 300.00 |
| - | | | | 80.00 |
| | Clothing, laundry, and dry cleaning | 9. | \$ | 0.00 |
| | Personal care products and services | 10. | | 50.00 |
| | Medical and dental expenses | 11. | \$ | 100.00 |
| 1 | Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. | 12. | · <u> </u> | 300.00 |
| 13. l | Entertainment, clubs, recreation, newspapers, magazines, and books | 13. | \$ | 50.00 |
| 14. | Charitable contributions and religious donations | 14. | \$ | 0.00 |
| 15. I | Insurance. | | | |
| J | Do not include insurance deducted from your pay or included in lines 4 or 20. | | | |
| | 15a. Life insurance | 15a. | \$ | 0.00 |
| | 15b. Health insurance | 15b. | \$ | 0.00 |
| | 15c. Vehicle insurance | 15c. | \$ | 275.00 |
| | 15d. Other insurance. Specify: | 15d. | \$ | 0.00 |
| 16. | Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: | 16. | \$ | 0.00 |
| | Installment or lease payments: | 10. | Φ | 0.00 |
| | 17a. Car payments for Vehicle 1 | 17a. | ¢ | 0.00 |
| | • • | 17a. 17b. | · - | |
| | 17b. Car payments for Vehicle 2 | | · | 0.00 |
| | 17c. Other. Specify: | 17c. | · - | 0.00 |
| | 17d. Other. Specify: | 17d. | \$ | 0.00 |
| | Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). | 18. | \$ | 0.00 |
| | Other payments you make to support others who do not live with you. | | \$ | 0.00 |
| | Specify: | 19. | • — | <u></u> |
| | Other real property expenses not included in lines 4 or 5 of this form or on Sche | | our Income. | |
| | 20a. Mortgages on other property | 20a. | | 0.00 |
| | 20b. Real estate taxes | 20b. | \$ | 0.00 |
| | 20c. Property, homeowner's, or renter's insurance | 20c. | · | 0.00 |
| | 20d. Maintenance, repair, and upkeep expenses | 20d. | · | 0.00 |
| | 20e. Homeowner's association or condominium dues | 20a. | | |
| | | | · | 0.00 |
| 21. | Other: Specify: student loans | 21. | +\$ | 500.00 |
| 22. | Calculate your monthly expenses | | | |
| | 22a. Add lines 4 through 21. | | \$ | 2,405.00 |
| | 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 | | \$ | |
| | 22c. Add line 22a and 22b. The result is your monthly expenses. | | g —— | 2 405 00 |
| | , , , | | Ψ | 2,405.00 |
| | Calculate your monthly net income. | 00- | ¢. | 2 222 22 |
| | 23a. Copy line 12 (your combined monthly income) from Schedule I. | 23a. | · | 2,200.00 |
| | 23b. Copy your monthly expenses from line 22c above. | 23b. | -\$ | 2,405.00 |
| | | | | |
| 2 | 23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income. | 23c. | \$ | -205.00 |
| | Do you expect an increase or decrease in your expenses within the year after yo For example, do you expect to finish paying for your car loan within the year or do you expect your modification to the terms of your mortgage? No. | | | ease or decrease because of a |
| | — No. | | | |

| Debtor 1 | Marisol Pizano | | | | |
|---|--|--|--|---|------------------------------------|
| Dalata a O | First Name | Middle Name | Last Name | | |
| Debtor 2 Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States Ba | ankruptcy Court for the: | DISTRICT OF OREGON | | | |
| Case number | | | | | |
| (if known) | | | | | Check if this is an amended filing |
| Official Fori | m 106Dec | | | | |
| | | an Individual | Debtor's Sched | ules | 12/15 |
| | | | | | |
| two married p | eople are filing togethe | r. both are equally respon | sible for supplying correct info | rmation. | |
| - | | | sible for supplying correct info | | |
| ou must file the obtaining mone ears, or both. 1 | is form whenever you fi y or property by fraud i 8 U.S.C. §§ 152, 1341, 1 | ile bankruptcy schedules n connection with a bankr | sible for supplying correct information or amended schedules. Making uptcy case can result in fines u | a false statement, cor | |
| ou must file the obtaining mone rears, or both. 1 | is form whenever you fi y or property by fraud i | ile bankruptcy schedules n connection with a bankr | or amended schedules. Making | a false statement, cor | |
| ou must file the obtaining mone ears, or both. 1 | is form whenever you fi y or property by fraud ii 8 U.S.C. §§ 152, 1341, 1 | ile bankruptcy schedules n connection with a bankr 1519, and 3571. | or amended schedules. Making | a false statement, cor p to \$250,000, or impr | |
| ou must file the obtaining mone rears, or both. 1 | is form whenever you fi y or property by fraud ii 8 U.S.C. §§ 152, 1341, 1 | ile bankruptcy schedules n connection with a bankr 1519, and 3571. | or amended schedules. Making ruptcy case can result in fines u | a false statement, cor p to \$250,000, or impr | |
| You must file the obtaining mone rears, or both. 1 Sig Did you pa | is form whenever you fi y or property by fraud ii 8 U.S.C. §§ 152, 1341, 1 | ile bankruptcy schedules n connection with a bankr 1519, and 3571. | or amended schedules. Making ruptcy case can result in fines u | a false statement, cor ip to \$250,000, or impr cy forms? | |
| ou must file the btaining mone ears, or both. 1 Sig Did you pa No Yes. | is form whenever you fi y or property by fraud it 8 U.S.C. §§ 152, 1341, 1 In Below ay or agree to pay some | ile bankruptcy schedules on connection with a bankr 1519, and 3571. | or amended schedules. Making ruptcy case can result in fines u | a false statement, corp to \$250,000, or improved the statement of the stat | risonment for up to 20 |
| ou must file the btaining mone ears, or both. 1 Sig Did you pa No Yes. Under penathat they are | is form whenever you fi y or property by fraud in 8 U.S.C. §§ 152, 1341, 1 In Below Ay or agree to pay some Name of person Alty of perjury, I declare | ile bankruptcy schedules on connection with a bankr 1519, and 3571. | or amended schedules. Making ruptcy case can result in fines u | a false statement, corp to \$250,000, or improved the statement of the stat | tition Preparer's Notice, |
| ou must file the btaining mone ears, or both. 1 Sig Did you pa No Yes. Under penathat they are that they are Marison | is form whenever you fi y or property by fraud in 8 U.S.C. §§ 152, 1341, 1 In Below ay or agree to pay some Name of person alty of perjury, I declare the true and correct. | ile bankruptcy schedules on connection with a bankr 1519, and 3571. | or amended schedules. Making ruptcy case can result in fines under the set of | a false statement, corp to \$250,000, or improved by the statement of the s | risonment for up to 20 |

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

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Best Case Bankruptcy

| Filli | n this inform | nation to identify you | r case: | | | |
|-----------------|---|--|--|---|---|---|
| | | | , caos. | | | |
| Deb | IOI I | Marisol Pizano First Name | Middle Name | Last Name | | |
| | tor 2 | | | | | |
| (Spou | ise if, filing) | First Name | Middle Name | Last Name | | |
| Unite | ed States Ba | nkruptcy Court for the: | DISTRICT OF OREGON | | | |
| Case (if kno | e number _ | | | | - | heck if this is an mended filing |
| Sta Be as | s complete a | of Financial | attach a separate sheet to | are filing together, both are | ankruptcy equally responsible for sup y additional pages, write you | |
| Part | | | arital Status and Where You | Lived Before | | |
| 1. | vvnat is you | r current marital statu | 18 f | | | |
| | ☐ Married■ Not mar | | | | | |
| 2. | During the la | ast 3 years, have you | lived anywhere other than v | where you live now? | | |
| | | , , | ived in the last 3 years. Do no | , | | |
| | Debtor 1 Pr | ior Address: | Dates Debtor 1 lived there | Debtor 2 Prior Ad | dress: | Dates Debtor 2 lived there |
| | | | | | ity property state or territory ico, Texas, Washington and W | |
| | | • | hedule H: Your Codebtors (Of | fficial Form 106H). | | |
| Part | 2 Explai | in the Sources of You | r Income | | | |
| | Fill in the tota | al amount of income yo | nployment or from operatin u received from all jobs and a have income that you receive | all businesses, including part | | ndar years? |
| | □ No ■ Yes. Fill | I in the details. | | | | |
| | | | Debtor 1 | | Debtor 2 | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| | | of current year until d for bankruptcy: | ■ Wages, commissions, bonuses, tips | \$10,687.00 | ☐ Wages, commissions, bonuses, tips | |
| | | | ☐ Operating a business | | ☐ Operating a business | |

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

| De | ebtor 1 | Ma | arisol Piza | no | | Cas | e number (if known) | | |
|----|----------|---------------|-------------------------|----------------|---|--|--|--------------|---|
| | | | | | | | | | |
| | | | | | Debtor 1 | | Debtor 2 | | |
| | | | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of inco | | Gross income (before deductions and exclusions) |
| | | | dar year: December | 31, 2018) | ■ Wages, commissions, bonuses, tips | \$23,961.00 | ☐ Wages, comr bonuses, tips | missions, | , |
| | | | | | ☐ Operating a business | | ☐ Operating a b | ousiness | |
| | | | dar year be December | | ■ Wages, commissions, bonuses, tips | \$10,974.00 | ☐ Wages, comr | missions, | |
| | | | | | ☐ Operating a business | | ☐ Operating a b | ousiness | |
| | | | | | ☐ Wages, commissions, bonuses, tips | \$6,232.00 | ☐ Wages, comr | missions, | |
| | | | | | Operating a business | | ☐ Operating a b | ousiness | |
| | | each s | • | the gross inco | e and you have income that y me from each source separat | Q | nat you listed in line | | |
| | | | | | Debtor 1 Sources of income Describe below. | Gross income from each source (before deductions and exclusions) | Debtor 2 Sources of inco Describe below. | | Gross income (before deductions and exclusions) |
| | | | / 1 of curre | nt year until | | \$0.00 | | | |
| | | | | | | | | | |
| Pa | rt 3: | List | Certain Pa | yments You | Made Before You Filed for I | Bankruptcy | | | |
| 6. | Are □ | eithei No. | Neither D | ebtor 1 nor D | s debts primarily consumer ebtor 2 has primarily consu personal, family, or househol | imer debts. Consumer debt | s are defined in 11 | U.S.C. § 101 | I(8) as "incurred by an |
| | | | During the | 90 days befo | re you filed for bankruptcy, di | d you pay any creditor a tota | l of \$6,825* or more | e? | |
| | | | ☐ Yes | paid that cre | ach creditor to whom you pai editor. Do not include paymen payments to an attorney for th | its for domestic support oblig | | | |
| | | | * Subject | | on 4/01/22 and every 3 years | | or after the date of | adjustment. | |
| | | Yes. | | | r both have primarily consure you filed for bankruptcy, di | | I of \$600 or more? | | |
| | | | ■ No. | Go to line 7 | | | | | |
| | | | ☐ Yes | include pay | ach creditor to whom you pai ments for domestic support ol this bankruptcy case. | | | | |
| | Cre | editor' | s Name an | d Address | Dates of payme | nt Total amount | Amount you still owe | Was this p | payment for |

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

| 7. | Within 1 year before you filed for bankruptc <i>Insiders</i> include your relatives; any general par of which you are an officer, director, person in a business you operate as a sole proprietor. 11 alimony. | rtners; relatives of any gene control, or owner of 20% or | eral partners; partners of their voting | erships of which yo g securities; and ar | u are a general ny managing ag | partner; corporation ent, including one fo |
|-----|--|--|---|---|-----------------------------------|--|
| | ■ No□ Yes. List all payments to an insider. | | | | | |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for t | his payment |
| 8. | Within 1 year before you filed for bankruptc insider? Include payments on debts guaranteed or cosi | | ments or transfer a | any property on a | ccount of a del | bt that benefited an |
| | ■ No□ Yes. List all payments to an insider | | | | | |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for t | • • |
| Pai | t 4: Identify Legal Actions, Repossession | s, and Foreclosures | • | | | |
| 9. | Within 1 year before you filed for bankrupto List all such matters, including personal injury of modifications, and contract disputes. No Yes. Fill in the details. | | | | | |
| | Case title Case number | Nature of the case Court or agency | | | Status of the | case |
| | Portfolio Recovery Associates LLC vs. Marisol Pizano 18CV56448 | Civil Claim | Yamhill County Court Case No: 18CV 535 E 5th Stree McMinnville, O | /56448 et | ■ Pending □ On appea □ Conclude | |
| 10. | Within 1 year before you filed for bankruptc Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below. | | rty repossessed, f | oreclosed, garnis | hed, attached, | seized, or levied? |
| | Creditor Name and Address | Describe the Property | | Date | | Value of the |
| | | Explain what happened | | | | property |
| 11. | Within 90 days before you filed for bankrup accounts or refuse to make a payment beca ■ No □ Yes. Fill in the details. | | uding a bank or fiı | nancial institution | , set off any ar | nounts from your |
| | Creditor Name and Address | Describe the action the | creditor took | Date : | action was | Amount |
| 12. | Within 1 year before you filed for bankruptc court-appointed receiver, a custodian, or ar ■ No □ Yes | | rty in the possess | | | it of creditors, a |

Case number (if known)

Official Form 107

Debtor 1 Marisol Pizano

Statement of Financial Affairs for Individuals Filing for Bankruptcy

| Deb | otor 1 | Marisol Pizano | | Case number | (if known) | |
|-----|---------------|--|----------|--|---|--------------------------|
| | | | | | | |
| Par | t 5: | List Certain Gifts and Contribution | s | | | |
| | | | | | han \$600 nay navaan | |
| 13. | _ | n 2 years before you filed for bankri No | uptcy, a | lid you give any gifts with a total value of more t | nan \$600 per person | <i>?</i> |
| | | Yes. Fill in the details for each gift. | | | | |
| | | with a total value of more than \$60 person | 0 | Describe the gifts | Dates you gave the gifts | Value |
| | Perso Addr | on to Whom You Gave the Gift and ress: | | | | |
| 14. | | No | | lid you give any gifts or contributions with a tot | al value of more than | \$600 to any charity? |
| | | es. Fill in the details for each gift or c | | | | |
| | more Char | or contributions to charities that to than \$600 ity's Name 'ess (Number, Street, City, State and ZIP Code | | Describe what you contributed | Dates you contributed | Value |
| | | | | | | |
| Par | t 6: | List Certain Losses | | | | |
| 15. | | n 1 year before you filed for bankru mbling? | ptcy or | since you filed for bankruptcy, did you lose any | thing because of the | t, fire, other disaster, |
| | _ | No Yes. Fill in the details. | | | | |
| | | cribe the property you lost and the loss occurred | Include | the amount that insurance has paid. List pending ce claims on line 33 of Schedule A/B: Property. | Date of your loss | Value of property lost |
| | | | insuran | ce claims on line 33 of Scriedule A/B. Property. | | |
| Par | t 7: | List Certain Payments or Transfers | 3 | | | |
| 16. | consu | ulted about seeking bankruptcy or p | oreparin | d you or anyone else acting on your behalf paying a bankruptcy petition? s, or credit counseling agencies for services require | | rty to anyone you |
| | | No | | | | |
| | _ ` | Yes. Fill in the details. | | | | |
| | | on Who Was Paid | | Description and value of any property | Date payment | Amount of |
| | | ess il or website address on Who Made the Payment, if Not Y | ou | transferred | or transfer was made | payment |
| | 5525 Beav | esa Pancic 5 SW 185th Avenue verton, OR 97078 esapancicmeier@comcast.net | | Attorney Fees | 6/11/19 - Paid \$300 7/18/19 - Paid \$100 7-25-19 - Paid \$200 | \$600.00 |
| | 1012 | ket Debt Counseling 21 SE Sunnyside kamas, OR 97015 | | Credit Counseling | 6/11/19 | \$25.00 |

| Debtor 1 | Marisol Pizano | | Ca | ase number (<i>if k</i> | (nown) | |
|---|--|---|---|---|---|---|
| | | | | | | |
| pror | nin 1 year before you filed for bankrupto mised to help you deal with your credito not include any payment or transfer that yo | ors or to make payment | | | ransfer any prope | rty to anyone who |
| | No Yes. Fill in the details. | | | | | |
| | rson Who Was Paid dress | Description and transferred | value of any prope | | Date payment or transfer was made | Amount of payment |
| tran: Inclu inclu | nin 2 years before you filed for bankrup sferred in the ordinary course of your bude both outright transfers and transfers mude gifts and transfers that you have alread No Yes, Fill in the details. | ousiness or financial aft ade as security (such as | fairs? the granting of a se | | | |
| Add | rson Who Received Transfer dress | Description and property transfe | | | y property or eceived or debts ange | Date transfer was made |
| | rson's relationship to you known ne | Sold 1997 Niss | an 240 | Received \$ used monic expenses a engagemen | e for living and for | 4/19 |
| Un | known | Sold 2006 Niss | an Altima | | 2500, used | 3/18 |
| No | ne | | | J | • | |
| 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a separate beneficiary? (These are often called asset-protection devices.) ■ No □ Yes. Fill in the details. | | ny property to a se | lf-settled trust | or similar device | of which you are a | |
| Nar | me of trust | Description and | on and value of the property transferred Date Transfer was made | | | Date Transfer was made |
| Part 8: | List of Certain Financial Accounts, In | struments, Safe Depos | it Boxes, and Stora | age Units | | |
| sold Inclu | nin 1 year before you filed for bankrupto d, moved, or transferred? ude checking, savings, money market, ses, pension funds, cooperatives, asso No Yes. Fill in the details. | or other financial accou | unts; certificates of | • | • | |
| | me of Financial Institution and dress (Number, Street, City, State and ZIP e) | Last 4 digits of account number | Type of account instrument | close | account was ed, sold, ed, or ferred | Last balance before closing or transfer |
| | nk of the West rnelius, OR 97113 | XXXX- | ■ Checking □ Savings □ Money Market □ Brokerage □ Other | abou acco | ed on or ut 6/24/19 - ount was drawn | \$0.00 |

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Debtor 1 Marisol Pizano Case number (if known)

| 21. | Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for secur cash, or other valuables? | | | | |
|-----|--|---|---------------------------------------|-----------------------|--|
| | ■ No □ Yes. Fill in the details. | | | | |
| | Name of Financial Institution Address (Number, Street, City, State and ZIP Code) | Who else had access to it? Address (Number, Street, City, State and ZIP Code) | Describe the contents | Do you still have it? | |
| 22. | Have you stored property in a storage unit or | place other than your home within 1 | year before you filed for bankruptcy | ? | |
| | ■ No □ Yes. Fill in the details. | | | | |
| | Name of Storage Facility | Who else has or had access | Describe the contents | Do you still | |
| | Address (Number, Street, City, State and ZIP Code) | to it? Address (Number, Street, City, State and ZIP Code) | Describe the contents | have it? | |
| Par | rt 9: Identify Property You Hold or Control fo | or Someone Else | | | |
| 23. | Do you hold or control any property that som for someone. | eone else owns? Include any proper | ty you borrowed from, are storing for | or hold in trust | |
| | ■ No □ Yes. Fill in the details. | | | | |
| | Owner's Name Address (Number, Street, City, State and ZIP Code) | Where is the property? (Number, Street, City, State and ZIP Code) | Describe the property | Value | |
| Par | rt 10: Give Details About Environmental Infor | mation | | | |
| | the purpose of Part 10, the following definition | | | | |
| ٠. | the purpose of Fart 10, the following definition | о арргу. | | | |
| | Environmental law means any federal, state, or toxic substances, wastes, or material into the regulations controlling the cleanup of these s | e air, land, soil, surface water, ground | <u> </u> | | |
| | Site means any location, facility, or property a to own, operate, or utilize it, including dispos | | law, whether you now own, operate, | or utilize it or used | |
| | Hazardous material means anything an environment hazardous material, pollutant, contaminant, o | | s waste, hazardous substance, toxic s | substance, | |
| Rep | port all notices, releases, and proceedings that | you know about, regardless of when | n they occurred. | | |
| 24. | Has any governmental unit notified you that y | ou may be liable or potentially liable | under or in violation of an environme | ental law? | |
| | ■ No □ Yes. Fill in the details. | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | Environmental law, if you know it | Date of notice | |
| 25. | Have you notified any governmental unit of a | ny release of hazardous material? | | | |
| | ■ No □ Yes. Fill in the details. | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | Environmental law, if you know it | Date of notice | |
| | | | | | |

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Debtor 1 Marisol Pizano Case number (if known)

| 26. | ave you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. | | | | nd orders. | |
|-----|--|---|--------|---|--------------------|--|
| | ■ No □ Yes. Fill in the details. | | | | | |
| | Case Title Case Number | Court or agency Name Address (Number, Street, City, State and ZIP Code) | Nat | ure of the case | Status of the case | |
| Par | t 11: Give Details About Your Business or Co | nnections to Any Business | | | | |
| 27. | Within 4 years before you filed for bankruptcy, | did you own a business or have an | y of | the following connections to any | business? | |
| | ☐ A sole proprietor or self-employed in a | trade, profession, or other activity, | eithe | er full-time or part-time | | |
| | ☐ A member of a limited liability compan | y (LLC) or limited liability partnersh | ip (Ll | LP) | | |
| | ☐ A partner in a partnership | | | | | |
| | ☐ An officer, director, or managing executive of a corporation | | | | | |
| | ☐ An owner of at least 5% of the voting or equity securities of a corporation | | | | | |
| | ■ No. None of the above applies. Go to Part 12. | | | | | |
| | ☐ Yes. Check all that apply above and fill in | the details below for each business | S. | | | |
| | Address | escribe the nature of the business ame of accountant or bookkeeper | | Employer Identification number Do not include Social Security number or ITIN. | | |
| | (Manager Country) country and an accept | Name of accountant of bookkeeper | | Dates business existed | | |
| 28. | 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. | | | | | |
| | ■ No | | | | | |
| | ☐ Yes. Fill in the details below. | | | | | |
| | Name Address (Number, Street, City, State and ZIP Code) | ate Issued | | | | |
| | | | | | | |

| Debtor 1 | Marisol Pizano | | Case number (if known) |
|-----------------------------------|-------------------------------|---|--|
| Part 12: | Sign Below | | |
| are true a with a baı | nd correct. I understand that | making a false statement, concealing princes up to \$250,000, or imprisonment for | ents, and I declare under penalty of perjury that the answers operty, or obtaining money or property by fraud in connection up to 20 years, or both. |
| /s/ Maris | sol Pizano | | |
| Marisol Signatur | Pizano e of Debtor 1 | Signature of Debtor 2 | |
| Date J | uly 18, 2019 | Date | |
| Did you a ■ No □ Yes | ttach additional pages to You | ur Statement of Financial Affairs for Indiv | riduals Filing for Bankruptcy (Official Form 107)? |
| Did you p | ay or agree to pay someone | who is not an attorney to help you fill out | bankruptcy forms? |
| ■ No | | , , , | |

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter | r 7: | Liquidation |
|----------|-------|--------------------|
| | \$245 | filing fee |
| | \$75 | administrative fee |
| <u>+</u> | \$15 | trustee surcharge |
| | \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

United States Bankruptcy Court District of Oregon

| In re | Marisol Pizano | | Case No. | |
|---------|---------------------------------|---|--------------------|-----------------------|
| | | Debtor(s) | Chapter | 7 |
| | VEI | MATRIX | | |
| | | | | |
| The abo | ove-named Debtor hereby verifie | es that the attached list of creditors is true and co | orrect to the best | of his/her knowledge. |
| Date: | July 18, 2019 | /s/ Marisol Pizano | | |
| | | Marisol Pizano | | |

Signature of Debtor